

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	E.H.		
O.I.P.E. CLASSIFIER		12	5/7
FORMALITY REVIEW	AM	917	06-05-01
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

..... Rejected  
 ..... Allowed  
 (Through numeral)..... Canceled  
 ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

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If more than 150 claims or 10 actions  
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